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7590 01/18/2006

Sheldon R. Meyer
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Mathew Otts	(Depositor's name)
	(Signature)
April 17, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/684,669	10/14/2003	James F. Zuchernan	KLYCD-05007US1	3387

TITLE OF INVENTION: ARTIFICIAL VERTEBRAL DISK REPLACEMENT IMPLANT WITH TRANSLATING PIVOT POINT AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	$700	$300	$1000	04/18/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
PHILOGENE, PEDRO	3733	623-017110

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 Fliesler Meyer LLP
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

04/21/2006 HAHMED2 00000041 10684669
01 FC:2501 700.00 OP
02 FC:1504 300.00 OP

(A) NAME OF ASSIGNEE: St. Francis Medical Technologies, Inc.
(B) RESIDENCE: (CITY and STATE OR COUNTRY): Concord, California

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:
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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____ Date _____

Typed or printed name Anthony G. Craig Registration No. 50,342

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